FGEIs (C/G) Directorate

Student Data (Cl I-VIII)

Anx-A

Photograph

Note:- Fill the form in Capital letters.

Student Bio Data

Name_____

Gender ☐ Male ☐ Female ☐ Transgender Religion_____ Sect_____

Form B No _____ Birth Place Province _____ Date of Birth ☐☐☐☐☐☐ D D M M Y Y

Birth Place (City) _____ Caste_____ Whatsapp_____ Writting Style ☐ Left Handed ☐ Right Handed

Disability Status (if any) _____ Disabiity Date _____Disability Type_____ Nature of Disability_____

Recovery Status_____ Height(cm)_____Weight(kg)_____ Built_____ Allergies (if any) _____

Blood Group ☐ A+ ☐ A- ☐ B+ ☐ B- ☐ AB+ ☐ AB- ☐ O+ ☐ O- Disease (if any)_____ Severity of Disease_____Disease Type_____

Date From_____Date To_____ Recovery Status_____ Vaccination_____

Contact Details

Father/ Guardian Cell no _____ Father E-mail _____ Landline_____

Mohter Cell no_____Mother E-mail _____ Present Address_____

_____Province_____Distt _____ City_____

Permanent Address _____ Internet Connectivity Plateform ☐ Cell Phone ☐ Tablet ☐ Laptop ☐ Desktop ☐ Non

Family Details

Father's Name _____ Father's Status ☐ Alive ☐ Dead Father's CNIC No _____

Father's Occupaion _____ Designation _____ Monthly Incom _____

Father's Office Address _____Province_____City_____ Country_____

Ph No_____ Father's Highest Qualification_____

Father's Domicile City _____ Domicile Province _____

Mohter's Name _____ Mother's Status ☐ Alive ☐ Dead ☐ Divorced Mother's CNIC No _____

Mother's Occupaion _____ Designation _____ Monthly Incom _____

Mother Office Address _____Province_____City_____ Country_____

Ph No_____ Mother's Highest Qualification_____

Number of brothers_____ Number of sisters_____

Guardian Details (If not being looked after by Parents)

Guardian Name_____ CNIC No_____ Relation_____

Pick & Drop

☐ Public Transport ☐ Parents ☐ School Van ☐ Bicycle ☐ Motor Cycle ☐ Hired Driver's Name(if Hired) _____

Driver's CNIC _____ Vehicle No_____ Driver Contact No _____

Sports

Game Interested _____ Playing Level_____ ExpertiseLevel ☐ Beginner ☐ Moderate ☐ Expert

Skills

Skill Type ☐ Curricular ☐ Exta-Curricular ☐ Hobby ☐ Special Talent Skill Level _____ Details_____

Father/ Guardian Singature _____ Date_____

For Office Use Only (To be filled by Class Teacher)

Admission No _____ Admission Date _____ Class _____Section_____

Category_____ Roll No_____ Admission Detail_____

House_____ Previous School ☐ FGEI ☐ Non- FGEI Previous School Region _____

Previous Schoon Name _____ Fee ID _____

Teacher SID _____ Signature _____ Date _____